PTO/SB/17 (01-06)

Approved for use through 7/31/2006. OMB 0651-0032
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Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. connie Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). Complete if Known 10/809906-Conf. #7260 Application Number FEE TRANSMITTAL March 26, 2004 Filing Date For FY 2006 Rahul K. SURANA First Named Inventor Examiner Name S. L. McDonald Applicant claims small entity status. See 37 CFR 1.27 3723 Art Unit TOTAL AMOUNT OF PAYMENT (\$) 1 120.00 Attorney Docket No. 008089 USA/MTCG/PCTRL

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METHOD OF PAYME	NT (check all th	nat apply)							
Check Credit Card Money Order None Other (please identify):									
x Deposit Account Deposit Account Number: 08-0219 Deposit Account Name: Wilmer Cutler Pickering Hale and Dorr LLP									
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing f									
Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17									
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)									
1. BASIC FILING, SEAR	H, AND EXAM	INATION FE	ES						
		G FEES	SEAR	CH FEES		TION FEES			
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)	
Utility	300	150	500	250	200	100			
Design	200	100	100	50	130	65			
Plant	200	100	300	150	160	80			
Reissue	300	150	500	250	600	300			
Provisional	200	100	0	0	0	0			
2. EXCESS CLAIM FEES								Small Entity	
Fee Description	1' - D.'\						Fee (\$)	Fee (\$)	
Each claim over 20 (inclue Each independent claim of							50 200	25 100	
Multiple dependent claim	•	g itelssues;					360	180	
• •		ee (\$)	Fee Paid	I (\$)	Mult	iple Depende			
44 - 20 =		0.00 =	100.0		Fee (\$)		Fee Paid (\$	1	
HP = highest numer of total cla	aims paid for, if great	ater than 20.						_	
Indep. Claims Extr	a Claims F	ee (\$)	Fee Paid	(\$)					
-3=	x								
HP = highest numer of indepe	•	or, if greater than	1 3.					_	
3. APPLICATION SIZE FI If the specification and of listings under 37 CFF sheets or fraction the	Irawings exceed R 1.52(e)), the a	application size	ze fee due is	\$250 (\$125 f	onically filed or small enti	sequence or ty) for each a	computer dditional 50)	
Total Sheets	Extra Sheets	Number	of each addit	ional 50 or frac	tion thereof	Fee (\$)	<u>Fee F</u>	Paid (\$)	
		/50	(ro	und up to a who	le number) x		=		
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)							Fees	Paid (\$)	
Other (e.g., late filing surcharge): 1253 Extension for response within third month						1.020.00			

SUBMITTED BY Registration No. (Attorney/Agent) 57,725 Telephone 202.663.6553 Signature Kotan Ko Name (Print/Type) Ketan Kadiwala July 13, 2006

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PTO/SB/22 (12-04)
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PETITION FO	R EXTENSION OF TIME UNDER 37	Docket Number (Optional)							
(Eage nursuant	FY 2005 to the Consolidated Appropriations Act, 20	08089 USA/MTCG/PCTRL							
		50 (Hatt 45 15).)	Filed Mo	rob 26, 2004					
Application Nun	nber 10/809,906		Filed Ma	rch 26, 2004					
For A TECHNIQUE FOR PROCESS-QUALIFYING A SEMICONDUCTOR MANUFACTURING TOOL USING METROLOGY DATA									
Art Unit 3	723		Examiner S	S. L. McDonald					
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.									
The requested	extension and fee are as follows (check	time period desi	red and enter the appr	ropriate fee below):					
		<u>Fee</u>	Small Entity Fee						
On	e month (37 CFR 1.17(a)(1))	\$120	\$60						
Tw	o months (37 CFR 1.17(a)(2))	\$450	\$225	\$					
X Thr	ee months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ 1,020.00					
Foo	ur months (37 CFR 1.17(a)(4))	\$1590	\$795	\$					
Fiv	e months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$					
Applicant claims small entity status. See 37 CFR 1.27.									
A check in the amount of the fee is enclosed.									
Payment by credit card. Form PTO-2038 is attached.									
X The Director has already been authorized to charge fees in this application to a Deposit Account.									
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number08-0219 I have enclosed a duplicate copy of this sheet.									
I am the applicant/inventor. assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).									
	x attorney or agent of record. Req	gistration Number	57,725						
	attorney or agent under 37 CFR			·					
	Ketan Kadwale	7-13-2006							
	Signature	Date							
	Ketan Kadiwala	202.663.6553							
	Typed or printed name	Telephon	e Number						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.									
X Total o	f forms are submitted	i.							

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